BOY SCOUTS OF AMERICA

# LOCAL TOUR PERMIT APPLICATION

FOR TRIPS AND CAMPS UNDER 500 MILES

**LOCAL PERMIT NO.**_____ **DATE ISSUED**_____

This application must be filed with local council service center two weeks in advance of scheduled activity for proper clearance. It is used for trips of less than 500 miles. If destination is 500 miles or more one way or outside the U.S.A. (local council camp excepted), use National Tour Permit Application, No. 4419C. Units going into wilderness or backcountry areas must carry a copy of and abide by the principles of Leave No Trace, No. 21-105.

_____ (Type of unit) No._____ Town_____ District_____ hereby applies

for a permit and submits plans herewith for a trip from_____ (Date), 20_____, to_____ (Date), 20_____.

Give itinerary if tour; or destination if camp, including route description for reaching campsite (for long trip attach map indicating route and overnight stops):

_____

_____

**Type of trip:** ☐ One day ☐ Touring camp ☐ Short-term camp ☐ Long-term camp (Furnish copy of program and menus.)

**Activity Standards:** Where swimming or boating is included in the program, Safe Swim Defense, No. 34370A, and/or Safety Afloat, No. 34368B, standards are to be followed. If climbing/rappelling is included, then Climb On Safely, No. 20-099B (which recommends the American Red Cross's standard first aid and When Help Is Delayed or equivalent course), must be followed.

One adult in the group must be trained as outlined:

| Name | Age | Safe Swim Defense Date Taken | Safety Afloat Date Taken | Climb on Safely Date Taken |
|---|---|---|---|---|
| | | | | |
| | | | | |

At least one person must be trained in CPR from any recognized agency for Safety Afloat and Climb On Safely.

| Name | Age | CPR Training | Agency | Expiration Date |
|---|---|---|---|---|
| | | | | |

At least one adult on a pack overnighter must have completed Basic Adult Leader Outdoor Orientation (BALOO, No. 34162).

| Name | Age | Date BALOO Training Completed |
|---|---|---|
| | | |

**Note: Unit must have a contingency plan for inclement weather.**

**Mode of transportation:** ☐ Car ☐ RV ☐ Van ☐ Bus ☐ Boat ☐ Canoe ☐ Train ☐ Hiking ☐ Truck ☐ Other _____

**(The beds of trucks and camper trucks are approved for equipment only—passengers are allowed only in the cab.)**

Tour will include_____ youth and_____ adults. Have parents' approvals been secured? _____

It is the tour leader's and unit committee member's understanding that all drivers, vehicles, and insurance coverages will meet the national requirements as listed on the reverse side of this application.

**Leadership and personnel:** Boy Scouts of America policy requires at least two adult leaders on all camping trips and tours. Coed Venturing crews must have both male and female leadership. The adult leader in charge of this group must be at least 21 years old.

**Youth Protection Training:**

- All registered adults participating in any nationally conducted event or activity must have completed the BSA Youth Protection Training.
- At least one registered adult who has completed BSA Youth Protection Training must be present at all other events and activities that require a tour permit.

**Tour leader's name**_____ (Print or type) Age_____ Phone_____

Address _____

**I have in my possession a copy of *Guide to Safe Scouting*, No. 34416, and have read it.** _____ (Tour leader's signature)

Assistant tour leader's name_____ Age_____ Phone _____

Address _____

_____ (Signed by member of unit committee) _____ (Signed by tour leader)

Signatures must be from two different people.

**RETAIN IN COUNCIL SERVICE CENTER**

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**OFFICIAL LOCAL TOUR OR CAMP PERMIT**
**BOY SCOUTS OF AMERICA**

This permit should be in the possession of group leader at all times and displayed when requested by Scouting officials or other duly authorized persons.

Permit issued to_____ (Type of unit) No._____ Town_____

_____ (Name of tour leader) (Age) (Address)

_____ (Name of tour leader) (Age) (Address)

Permit covers all travel between_____ and_____

Dates of trip from_____, 20_____, to _____, 20_____

Total youth_____ Total adults _____

This group has given the local council every assurance that they will conduct themselves according to the best standards of Scouting and observe all rules of health, safety, and sanitation as prescribed by the Boy Scouts of America and as stated in the Pledge of Performance on the reverse side of this permit.

**Local Permit No.** _____

**Date Issued** _____

**Council Stamp**

Not official unless council stamp appears here.

**These spaces are for the signatures and comments of officials where the group camps or stays for one night or more. Signatures indicate that the cooperation and conduct of the Cub Scout, Boy Scout, Varsity Scout, or Venturing group were satisfactory in every way.**

| Date | Place | Signature | Comment |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

_____ (Council name and address)

_____ (Council phone no.)

_____ (Signed for the council)

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